## PATENT APPLICATION FEE DETERMINATION RECORD

:5

Effective October 1, 2000

Application or Docket Number

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| CLAIMS AS FILED - PART I<br>(Column 1)  |   |   |             |                               |                      | mn 2)            |     | SMALL EN       | NTITY                  | OR | OTHER THAN SMALL ENTITY |                        |
|---|---|---|-------------|-------------------------------|----------------------|------------------|-----|----------------|------------------------|----|-------------------------|------------------------|
| TC  | TAL CLAIMS  |   | 30          |                               |                      |                  |     | RATE           | FEE                    | 1  | RATE                    | FEE                    |
| FO  | R   |   | NUMBER      | FILED                         | NUMB                 | ER EXTRA         |     | BASIC FEE      | 355.00                 | OR | BASIC FEE               | 710.00                 |
| то  | TAL CHARGEA   | BLE CLAIMS                                | 30 mir      | nus 20=                       |                      | 0                |     | X\$ 9=         | 90                     | OR | X\$18=                  |                        |
| IND   | EPENDENT CL   | AIMS                                      | <b>2</b> mi | nus 3 =                       | *                    | ø                |     | X40=           | 8                      | OR | X80=                    |                        |
| MU  | LTIPLE DEPEN  | DENT CLAIM PI                             | RESENT      |                               | ·····                |                  |     | +135=          | 8                      | OR | +270=                   |                        |
| * If the difference in column 1 is less than zero, enter  |   |   |             |                               | r "0" in c           | column 2         | i   | TOTAL          | 445                    | OR | TOTAL                   |                        |
|   | C   | LAIMS AS A                                | MENDE       | ) - PAR                       | T II                 |                  |     |                |                        |    | OTHER                   | THAN                   |
| _   |   | (Column 1)                                | 1           | (Colur                        |                      | (Column 3)       |     | SMALL          | ENTITY                 | OR | SMALL                   | ENTITY                 |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY         | PRESENT<br>EXTRA |     | RATE           | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
| NDN   | Total   | .   | Minus       | 6                             | 0                    | =                |     | X\$ 9=         |                        | OR | X\$18=                  |                        |
| AME   | Independent   | NTATION OF MI                             | Minus       | *** (                         |                      | ٦                |     | X40=           |                        | OR | X80=                    |                        |
| <u></u>   | FIRST PRESE   | NIATION OF MI                             | JLTIPLE DEI | PENDEN                        | CLAIM                |                  |     | +135=          |                        | OR | +270=                   |                        |
|   |   |   |             |                               |                      |                  |     | TOTAL          |                        |    | TOTAL                   |                        |
|   |   | (Column 1)                                |             | (Colur                        | mn 2)                | (Column 3)       | •   | ADDIT. FEE     |                        |    | ADDIT. FEE              |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>DUSLY | PRESENT<br>EXTRA | . [ | RATE           | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total   | •   | Minus       | **                            |                      | =                |     | X\$ 9=         |                        | OR | X\$18=                  |                        |
| AME   | Independent   | *   | Minus       | ***                           |                      | =                |     | X40=           |                        | OR | X80=                    |                        |
|   | FIRST PRESE   | NTATION OF MU                             | JLTIPLE DEF | PENDENT                       | CLAIM                |                  | ij  | +135=          |                        |    | +270=                   |                        |
|   |   |   |             |                               |                      |                  | į   | TOTAL          |                        | OR | TOTAL                   |                        |
|   |   |   |             |                               |                      |                  | ,   | ADDIT. FEE     |                        | OR | ADDIT. FEE              |                        |
|   |   | (Column 1) CLAIMS                         | 1           | (Colur                        |                      | (Column 3)       | l , |                |                        |    |                         |                        |
| AMENDMENT C   |   | REMAINING<br>AFTER<br>AMENDMENT           |             | NUM<br>PREVIO<br>PAID         | BER<br>DUSLY         | PRESENT<br>EXTRA |     | RATE           | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
| N N   | Total   | *   | Minus       | **                            |                      | =                |     | X\$ 9=         |                        | OR | X\$18=                  |                        |
| AME   | Ind pendent   | *   | Minus       | ***                           |                      | =                |     | X40=           |                        | OR | X80=                    |                        |
| L   | FIRST PRESE   | CLAIM                                     |             | ۱ <del> </del>                |                      |                  |     |                |                        |    |                         |                        |
| •   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |             |                               |                      |                  |     | +135=<br>TOTAL |                        | OR | +270=                   |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL  ADDIT. FEE  ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |             |                               |                      |                  |     |                |                        |    |                         |                        |

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| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |              |                                   |                                       |                  | SMALL ENTITY TYPE |                    |                        | OTHER THAN OR SMALL ENTITY |                     |                        |
|---|--|---|--------------|-----------------------------------|---------------------------------------|------------------|-------------------|--------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   |              |                                   |                                       |                  |                   | RATE               | FEE                    | 7                          | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED |                                   | NUME                                  | NUMBER EXTRA     |                   | BASIC FEE          | 370.00                 | OR                         | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | minus 20= *  |                                   | *                                     |                  |                   | X\$ 9=             |                        | OR                         | X\$18=              |                        |
| IN  | DEPENDENT C  | LAIMS                                     | minus 3 = *  |                                   |                                       |                  |                   | X42=               |                        | OR                         | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |              |                                   | · · · · · · · · · · · · · · · · · · · |                  |                   | +140=              |                        | OR                         |                     |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |              |                                   |                                       | i                | TOTAL             |                    | OR                     | TOTAL                      |                     |                        |
|   | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |   |              |                                   |                                       |                  | SMALL             | ENTITY             | OR                     | OTHER<br>SMALL             |                     |                        |
| <b>AMENDMENT A</b>  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUMI<br>PREVIO<br>PAID    | BER<br>DUSLY<br>FOR                   | PRESENT<br>EXTRA |                   | RATE               | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| ON  | Total  | * /                                       | Minus        | ** 2                              | 0                                     |                  |                   | X\$ 9=             |                        | OR                         | X\$18=              |                        |
| AME   | Independent  | * /<br>ENTATION OF MI                     | Minus        | PENDENT                           | CLAIM                                 | =                |                   | X42=               |                        | ĢЯ                         | X84=                |                        |
|   | Timottitiza  | ENTANOIN OF IM                            | DETIFICE DE  | ·                                 | CDAIM                                 |                  | ۱ [               | +140=              |                        | OR                         | +280=               |                        |
|   |  |   |              |                                   |                                       |                  | · •               | TOTAL<br>ODIT. FEE | /                      | OR                         | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Column 1)                                |              | (Colun                            |                                       | (Column 3)       |                   |                    |                        | •                          |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHI<br>NUME<br>PREVIO<br>PAID I | BER<br>DUSLY                          | PRESENT<br>EXTRA |                   | RATE               | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| ND  | Total  | *   | Minus        | **                                | _                                     | = .              |                   | X\$ 9=             | ,                      | OR                         | X\$18=              | · ·                    |
| AME   | Independent  | *   | Minus        | ***                               |                                       | = .              |                   | X42=               |                        | OR                         | X84=                |                        |
|   | FIRST PRESE  | NTATION OF MU                             | JLTIPLE DEF  | ENDENT                            | CLAIM                                 |                  | <b>'</b>          | +140=              |                        | OR                         | +280=               |                        |
|   | . '  |   |              |                                   |                                       |                  | L<br>Ai           | TOTAL<br>DDIT. FEE |                        |                            | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Column 1)                                | ·            | (Colum                            |                                       | (Column 3)       |                   |                    |                        |                            |                     |                        |
| AMENDMENIC  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUMB<br>PREVIO<br>PAID F | ER<br>USLY                            | PRESENT<br>EXTRA |                   | RATE               | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **                                |                                       |                  |                   | X\$ 9=             | A.                     | OR                         | X\$18=              |                        |
|   | Independent  |   | Minus        | <del>**</del>                     |                                       | =                | <b> </b>          | X42=               |                        | OR                         | X84=                |                        |
| 1   | FIRST PRESE  | NTATION OF MU                             | LTIPLE DEP   | ENDENT                            | CLAIM                                 |                  | <b> </b>          |                    |                        |                            | +280=               | :                      |
| * If the entry in column 1 is less than the entry in column 2, writ "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |                                   |                                       |                  |                   |                    |                        |                            |                     |                        |